163 12100 08

62206

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form IC -- identification and Certification

tions for this form found on pages 6 - 12

| This form must be completed for the location shown on the above label. If you need additional forms for other locations, call IEPA. |
|---|
| Sec. I – Generator Status A. 1 RCRA Generator Status (Enter one code) |
| 1 = LOG) RECEIVED |
| 2 = SQG |
| 4 = Nongenerator (Continue to Box B) IEPA/DLPC |
| B. Reason for not generating (Check all that apply) |
| 22 Out of business 33 Periodic generator, none in reporting year 34 Waste minimization activity |
| Only excluded or delisted waste generated of the comments box Only non-hazardous waste generated |
| 1 Status Time Period: 1 = Expected to be the same next year and following years. 2 = Expected to change next year. |
| Section II. Enter the SIC Code(s) for this location. |
| $\frac{3}{30} \frac{3}{41} \frac{4}{43} \frac{3}{43} \frac{3}{51} \frac{5}{47} \frac{3}{51} \frac{3}{51} \frac{6}{51} \frac{6}{51}$ |
| Section III. On-Site Waste Management Status (enter one code for each question) |
| A. $_{55}$ $= \frac{1}{1}$ RCRA regulated (permitted or interim status) storage $_{5}$ B. $_{56}$ $= \frac{1}{1}$ RCRA permitted or interim status treatment, disposal, or recycling |
| C. 57 Treatment, disposal, or recycling exempt from RCRA permit requirements |
| Section IV. Waste Minimization Activity During This Reporting Year (Enter Y [Yes] or N [No] for questions A-E) (ONLY LOG'S SHOULD COMPLETE SECTION IV) |
| A. 58 Y Did this site begin or expand a source reduction activity this year? If "no" refer to page 48 and list factors in D first row. |
| B. 59 N Did this site begin or expand a recycling activity this year? If "no" refer to page 48 and list factors in D second row. |
| Did this site systematically investigate opportunities for source reduction or recycling? |
| Did any of the factors listed on page 48 delay or limit this site's ability to initiate new or additional source reduction or on- site or off-site recycling activities this year; if yes, refer to page 48 and enter Y on the appropriate row below. |
| SOURCE REDUCTION LIMITING FACTORS |
| a. b. c. d. Y e. f. Y g. Y h. i. Y j |
| RECYCLING LIMITING FACTORS |
| a. b. c. d. e. f Y g. Y h. i. j. k. l. m. n. o. st o. |
| Does this site have in place an organized program to implement recycling and/or source reduction activities? If "yes", refer to page 49 and mark all activities which describe your program on spaces 87 through 99. |
| a. Y b. c. d. e. Y l. g. h. i. j. k. l. m. 90 |
| COMMENTS: Enter Y (Yes) if you have comments regarding this page and attach extra sheet. |
| Sec. V. This Agency is authorized to require this information under 415 ILCS 5/4 and 21 (f)(2). Disclosur's of this information in required. Failure to do so may result in a criticipenal ty up to 325,999 for each day the failure continues, a fine up to \$1,000,000.00 and imprisonment up to \$ years. This form has been approved by the Forms Management Center Centification. I certify under penalty of law that have personally examined and art familiar with the information submitted in this and all stacched documents, and that there are significant penalties for submitting false information, including the possibility of fine and impresonment. |
| A. Please print: Last Name Conreaux First Name Robert B. Title V.P Manufacturing |
| Naples - |

ILD 080 018 914 163 12100 08

CERRO COPPER PRODUCTS CO
3000 MISSISSIPPICE HWY 3

SAUGET 11

62206

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM — Waste Generation and Management

Instructions for this form found on pages 13 - 30.

| Sec. 1 WASTE DESCRIPTION | |
|---|------------|
| A. Waste Description: Solvent Still Bottoms - Trichloroethylene | |
| B EPA Hazardous Waste Code F 0 0 1 | |
| C. SIC code 3 3 5 1 30 34 42 44 | |
| D. Origin Code ³⁰ 1 System type M E. Source code A 1 9 A A | |
| F. Point of measurement $\frac{1}{48}$ G. Waste form code 8201 | |
| H. Radioactive mixed $\frac{2}{3}$ 1. TRI constituent $\frac{2}{3}$ | |
| D. Origin Code $\frac{30}{34}$ System type M E. Source code A $\frac{1}{9}$ A A A F. Point of measurement $\frac{1}{48}$ G. Waste form code B $\frac{2}{74}$ J. CAS numbers: 1. $\frac{7}{9}$ - $\frac{0}{1}$ - $\frac{6}{6}$ 2. | |
| 4 5 5 5. | |
| Sec. II QUANTITY GENERATED AND MANAGED ON-SITE | |
| UOM 1 Density 9.78 lbs/gal (Same unit and density must be used for all quantities on this page) | |
| UOM $\frac{1}{15}$ Density $\frac{9 \cdot 7}{15}$ lbs/gal (Same unit and density must be used for all quantities on this page) Ouantity generated in : B Previous reporting year $\frac{0 \cdot 0}{120}$. C. Current reporting year $\frac{3 \cdot 3 \cdot 0}{120}$ | . <u>0</u> |
| D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, | |
| recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) | |
| On-Site System 1: System Type M Quantity managed on-site this year | |
| On-Site System 1: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year 155 | |
| | |
| Sec. III OFF-SITE SHIPMENT A. Was any of this waste shipped off site this reporting year? Y= Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) | |
| Site 1: Name and address of facility: | |
| Clayton Chemical Co. | |
| No. 1 Mobile Ave., Sauget, IL 62201 | |
| B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 C. System type shipped to M 0 2 2 D. Off-site availability code E. Total quantity shipped in this reporting year: 2: Name and address of facility: | |
| C. System type snipped to MO Z Z D. On-site availability code | |
| E. Total quantity snipped in this reporting year; | |
| e 2: Name and address of facility: | |
| | |
| P. 11 C. EDA ID No. of facility waste was shipped to: | |
| B. U.S. EPA ID No. of facility waste was shipped to: | |
| C. System type shipped to M D. Off-site availability code 213 | |
| E. Total quantity shipped in this reporting year: | |
| Sec. IV NEW WASTE MINIMIZATION ACTIVITIES | |
| A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) | |
| B. Activity W W W C. Other effects (Y=Yes, N=No) | |
| D. Quantity recycled in reporting year due to new activities | |
| E. Activity/production index F. Reporting year Source reduction quantity 238 F. Reporting year Source reduction quantity | _ |
| Sec. V REGULATED STORAGE | |
| A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) | |
| B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end; (Y= Yes, N= No) | |
| Cuantity stored at year end and for 90 days or more that was generated this reporting year: | _ |
| Quantity stored at year end that wa; generated prior to this reporting year: | - |
| Quantity stored at year end that wa; generated prior to this reporting year: | |
| COMMENTS: Enter Y (Yes) if you have comments regarding this page and attach extra sheet. | - |

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3

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM — Waste Generation and Management

| Sec. I WASTE DESCRIPTION |
|---|
| A. Waste Description: Solvent Still Bottom Sludge, Trichloroethylene |
| B. EPA Hazardous Waste Code F 0 0 1 |
| C. SIC code $\frac{3}{50} \cdot \frac{3}{1} \cdot \frac{5}{1} \cdot \frac{1}{1}$ |
| D. Origin Code 3 System type M E. Source code A 1 3 A A A A |
| F. Point of measurement 1 G. Waste form code B 0 U 1 |
| H. Radicactive mixed 2 1. TRI constituent 3 74 |
| D. Origin Code 50 1 System type M E. Source code A 1 9 A A S |
| 4 5 |
| Sec. II QUANTITY GENERATED AND MANAGED ON-SITE |
| A. UOM 1 Density 8 3 7 Ibs/gal (Same unit and density must be used for all quantities on this page) Ouantity generated in : B Previous reporting year 0 . C. Current reporting year 165. |
| Quantity generated in : B Previous reporting year 0. C. Current reporting year 165. |
| D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, |
| recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) |
| On-Site System 1: System Type M Quantity managed on-site this year |
| On-Site System 1: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year Quantity managed on-site this year |
| 155 |
| Sec. III OFF-SITE SHIPMENT |
| A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) Site 1: Name and address of facility: Clayton Chemical Co. |
| 1 Moblie Ave., Sauget, IL 62201 |
| B. U.S. EPA ID No. of facility waste was shipped to: \[\frac{\text{I}}{170} & \text{D} & \text{O} & \text{6} & \text{9} & \text{1} & \text{8} & \text{2} & \text{7} \] C. System type shipped to \[\frac{\text{M}}{02} & \text{2} & \text{D}. \] Off-site availability code \[\frac{1}{1865} & \text{0} & \text{1} \] E. Total quantity shipped in this reporting year: \[\frac{1}{187} & \text{0} & \text{0} & \text{1} \] The 2: Name and address of facility: \[\frac{1}{187} & \text{0} & \text{0} & \text{0} & \text{0} \] |
| C. System type shipped to $M = 0.2.2$ D. Off-site availability code 1 |
| E. Total quantity shipped in this reporting year: 1 6 1865 0 |
| te 2: Name and address of facility: |
| |
| |
| B. U.S. EPA ID No. of facility waste was shipped to: |
| C. System type shipped to M D. Off-site availability code |
| E. Total quantity shipped in this reporting year: |
| 214 |
| Sec. IV NEW WASTE MINIMIZATION ACTIVITIES |
| A. Did new activities in this year result in minimization of this waste? $\frac{N}{224}$ Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) |
| B. Activity W W W C. Other effects (Y=Yes, N=No) 237 |
| D. Quantity recycled in reporting year due to new activities |
| E. Activity/production index F. Reporting year Source reduction quantity 248 7. Reporting year Source reduction quantity |
| Sec. V REGULATED STORAGE |
| A Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) |
| B Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) |
| Cuantity stored at year and and for 00 days are well as a control of the control |
| Quantity stored at year end that was generated prior to this reporting year: |
| 273 |
| Ouantity stored at year end and for 90 days or more that was generated this reporting year: Ouantity stored at year end that was generated prior to this reporting year: 273 COMMENTS: Enter Y (Yes) if you have comments regarding this page and attach extra sheet. |

| | Sec. I WASTE DESCRIPTION |
|--------------------|---|
| • | A. Waste Description: Solvent Still Bottoms, 1,1,1 Trichlorethane |
| | B. EPA Hazardous Waste Code <u>F 0 0 1</u> 34 - 42 - 44 |
| | C SIC code 3 3 3 1 |
| . • | D. Origin Code 1 System type M E. Source code A 1 9 A A |
| | F. Point of measurement $\frac{1}{2}$ G. Waste form code $\frac{B^2}{C}$ |
| | H. Radioactive mixed 2 4 1. TRI constituent 3 2 2 4 |
| | D. Origin Code $\frac{50}{34}$ System type $\frac{M}{55}$ E. Source code $\frac{A}{2}$ $\frac{1}{9}$ $\frac{A}{4}$ F. Point of measurement $\frac{1}{2}$ G. Waste form code $\frac{B^2}{7^2}$ $\frac{0^2}{1}$ H. Radioactive mixed $\frac{2}{7^3}$ J. CAS numbers: 1. $\frac{7}{7^2}$ $\frac{7}{1}$ $\frac{5}{5}$ $\frac{5}{6}$ 2. $\frac{3}{51}$ |
| | |
| | 4 |
| | Sec. II QUANTITY GENERATED AND MANAGED ON-SITE |
| | |
| رىن سىرىن | A. UOM 1 Density 9.7 8 lbs/gal (Same unit and density must be used for all quantities on this page) Ouantity generated in : B Previous reporting year 4 5 6 3.0 . C. Current reporting year 3 3 1 5 0 |
| | Cushing generated in . B. Previous reporting year 120 120 120 130 130 130 130 130 130 130 130 130 13 |
| <u>ښ</u> | D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment. |
| 7 | recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) |
| · | On-Site System 1: System Type M Quantity managed on-site this year |
| | On-Site System 1: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year Quantity managed on-site this year |
| | |
| _ | Sec. III OFF-SITE SHIPMENT |
| <u>ت</u> | A. Was any of this waste shipped off site this reporting year? Y = Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| | Site 1: Name and address of facility: Clayton Chemical Co. |
| ` | No. 1 Mobile Ave., Sauget, IL 62201 |
| ? | |
| • | B. U.S. EPA ID No. of facility waste was shipped to: I L D O 6 6 9 1 8 3 2 7 |
| = | C. System type shipped to M 0 2 2 D. Off-site availability code E. Total quantity shipped in this reporting year: 3 3 1 186 5 0 |
| Ω | E. Total quantity shipped in this reporting year: 3 3 1 186 5 0 |
| "' <u> </u> | ூite 2: Name and address of facility: |
| • | |
| | |
| | B. U.S. EPA ID No. of facility waste was shipped to: |
| | C. System type shipped to M D. Off-site availability code |
| | E. Total quantity chipped in this reporting year: |
| | E. Total quantity shipped in this reporting year: |
| | Sec. IV NEW WASTE MINIMIZATION ACTIVITIES |
| | |
| | A. Did new activities in this year result in minimization of this waste? Y = Yes (Cont. to Box B) N= No (Cont. to Sec. V) |
| | B. Activity W 7 1 W W C. Other effects (Y=Yes, N=No) 11 237 |
| | U. Quantity recycled in reporting year due to new activities . |
| | E. Activity/production index F. Reporting year Source reduction quantity 1 2 4 8 0 |
| | Sec. V REGULATED STORAGE |
| | A Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) |
| _ | B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end; (Y= Yes, N= No) |
| 3 | Quantity stored at year end and for 90 days or more that was generated this reporting year: |
| $\tilde{\bigcirc}$ | Quantity stored at year and that was generated prior to this months year. |
| 00000 | Ouantity stored at year end that was generated prior to this reporting year: |
| () | |
| ت | COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page |

FORM GM - WASTE GENERATION AND MANAGEMENT

COMMENTS

SEC. IV, LINE B. - ACTIVITY W71 = CONVERTED TO NON-HAZARDOUS ORGANIC SOLVENTS

PAGE 4H OF 19

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787

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM - Waste Generation and Management

Instructions for this form found on pages 13 - 30.

| | Sec. I WASTE DESCRIPTION |
|---------------|--|
| | A. Waste Description: Solvert Still Bottom Sludge, 1,1,1 Trichlorethane |
| | B. EPA Hazardous Waste Code F 0 0 1 C. SIC code 3 3 5 1 34 42 46 |
| | C. SIC code 3 3 5 1 D. Origin Code 5 1 System type M F. Point of measurement 1 H. Radioactive mixed 2 G. Waste form code B 6 C 1 I. TRI constituent 3 |
| | D. Origin Code 1 System type M E. Source code A 1 A A A 65 |
| | F. Point of measurement 1 G. Waste form code B 5 U 1 |
| | H. Radioactive mixed $\frac{2}{73}$ 1. TRI constituent $\frac{3}{73}$ |
| | J. CAS numbers: 1. 7 1 -5 5 - 6 2. 3. 3. 3. |
| | 4 5 5 |
| | Sec. II QUANTITY GENERATED AND MANAGED ON-SITE |
| | 1. UOM 1 Density 8. 3.7 lbs/gal (Same unit and density must be used for all quantities on this page) |
| ` | 1. UOM 1 Density 8.37 lbs/gal (Same unit and density must be used for all quantities on this page) Quantity generated in: B Previous reporting year 110000. C. Current reporting year 495.0 |
| | D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, |
| | recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) |
| 3 | On-Site System 1: System Type M Oughtity marraged on site this year |
| _ | On-Site System 1: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year |
| 2 | On-Site System 2. System Type M Quantity managed on-site this year |
| = | Sec. III OFF-SITE SHIPMENT |
| | A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| = | Site 1: Name and address of facility: |
| | Clayton Chemical Co. |
| | 1 Mobile Ave., Sauget, IL 62201 |
| <i>?</i> : | B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 |
| - | C. System type shipped to M <u>U 2 2</u> D. Off-site availability code |
| _ | E. Total quantity shipped in this reporting year: 4 9 186 0 |
| a_{ζ} | ite 2: Name and address of facility: |
| , · | |
| | |
| | B. U.S. EPA ID No. of facility waste was shipped to: |
| | C. System type shipped to M D. Off-site availability code |
| | E. Total quantity shipped in this reporting year: |
| | 214 |
| | Sec. IV NEW WASTE MINIMIZATION ACTIVITIES |
| | A. Did new activities in this year result in minimization of this waste? Y = Y= Y= Y= (Cont. to Box B) N= No (Cont. to Sec. V) |
| | B. Activ.ty W 7 1 W W C. Other effects (Y=Yes, N=No) N D. Quantity recycled in reporting year due to new activities E. Activity/production index |
| | D. Quantity recycled in reporting year due to new activities |
| | E. Activity/production index F. Reporting year Source reduction quantity 6 0 5 0 |
| | Sec. V REGULATED STORAGE |
| | |
| | Table 1101 Wastes 30 days of more and then ship it on-site (to site shown in Section iii). (Y=Yes, N=No) |
| \Rightarrow | to the waste of their so days but waste is in storage at year end; (Y= Yes, N= No) |
| ت | Quantity stored at year end and for 90 days or more that was generated this reporting year: |
| 2 | Ouantity stored at year end that was generated prior to this reporting year: |
| | |
| Ú | COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet. |

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FORM GM - WASTE GENERATION AND MANAGEMENT

COMMENTS

SEC. IV, LINE B. - ACTIVITY W71 = CONVERTED TO NON-HAZARDOUS ORGANIC SOLVENTS

PAGE OF 19

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ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM – Waste Generation and Management

| Sec. 1 WASTE DESCRIPTION | |
|---|----------|
| A. Waste Description: Waste Solvent 1,1,1 Trichlorethane | |
| B. EPA Hazardous Waste Code <u>F 0 0 1</u> | |
| C. SIC code $\frac{3}{50} \cdot \frac{3}{1} \cdot \frac{5}{1} \cdot \frac{1}{1}$ | |
| D. Origin Code 1 System type M E. Source code A 1 9 A 65 | |
| F. Point of measurement $\frac{1}{RB}$ G. Waste form code $\frac{BZ}{AB} = \frac{0.2}{2}$ | |
| C. SIC code $\frac{3}{50} \frac{3}{1} \frac{5}{1} $ | |
| J. CAS numbers: 1. 7 1 - 5 5 - 6 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. | |
| 4 | |
| 99 107 | |
| Sec. II QUANTITY GENERATED AND MANAGED ON-SITE | |
| A. UOM 1 Density 1 0 .4 5 lbs/gal (Same unit and density must be used for all quantities on this page) | _ |
| A. UOM 1 Density 1 0 .4 5 lbs/gal (Same unit and density must be used for all quantities on this page) Ouantity generated in : B Previous reporting year 8 9 6 8 5 0. C. Current reporting year 1 3 6 9 5. | <u>U</u> |
| D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, | |
| recycling, or disposal process? Y Y= Yes (Continue to System 1) N= No (Skip to Sec. III) | |
| On-Site System 1: System Type M 120 2 1 Quantity managed on-site this year 13695.0 | |
| On-Site System 2: System Type M Quantity managed on-site this year 145 | |
| | |
| Sec. III OFF-SITE SHIPMENT | |
| A. Was any of this waste shipped off site this reporting year? Y = Yes (Continue to Box B) N= No (Skip to Sec. IV) Site 1: Name and address of facility: | |
| Clayton Chemical Company | |
| No. 1 Mobile Ave., Sauget, IL 62201 | |
| B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 | |
| 170 | |
| C. System type shipped to M 0 2 2 D. Off-site availability code 1 E. Total quantity shipped in this reporting year: 5 5 4 6 . 0 | |
| E. Total quantity shipped in this reporting year: 5 5 4 6 . 0 | |
| The 2. Name and address of facility. | |
| | |
| B. U.S. EPA ID No. of facility waste was shipped to: | |
| 107 | |
| 4 200 | |
| E. Total quantity shipped in this reporting year: | |
| Sec. IV NEW WASTE MINIMIZATION ACTIVITIES | |
| A. Did new activities in this year result in minimization of this waste? Y Y= Ycs (Cont. to Box B) N= No (Cont. to Sec. V) | |
| B. Activity W 7 1 W W W C Other effects (Y=Yes N=No) N | |
| 275 278 278 | |
| D. Quantity recycled in reporting year due to new activities E. Activity/production index |) |
| 248 F. Reporting year Source reduction quantity | - |
| Sec. V REGULATED STORAGE | |
| Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) | |
| Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) | |
| Ouantity stored at year end and for 90 days or more that was generated this reporting year: Ouantity stored at year end that was generated prior to this reporting year: | |
| Quantity stored at year end that was generated prior to this reporting year: | |
| 273 | |
| | |
| COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet. | |

FORM GM - WASTE GENERATION AND MANAGEMENT

COMMENTS

SEC. IV, LINE B. - ACTIVITY W71 = CONVERTED TO NON-HAZARDOUS ORGANIC SOLVENTS

| Sec | c. I WASTE: JON |
|--------|---|
| A. | Waste Descriptaste Cleaning Solution, Stripper Dip Mix |
| В. | EPA Hazardous Waste Code <u>D</u> <u>O</u> |
| C. | 21C COOR 2 2 4 1 |
| D. | Origin Code $\frac{50}{54}$ System type $\frac{M}{55}$ E. Source code $\frac{A}{5}$ $\frac{2}{5}$ $\frac{2}{5}$ $\frac{A}{5}$ A |
| F. | Point of measurement $\frac{1}{2}$ G. Waste form code $\frac{B_1}{2} = \frac{O_1}{2}$ |
| H. | Radioactive mixed 2 4 I. TRI constituent 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| J. | CAS numbers: 1 2 3 3 3. |
| | 4. 60 5. 107 |
| | 107 |
| | . II QUANTITY GENERATED AND MANAGED ON-SITE |
| | UOM $\frac{1}{115}$ Density $\frac{8}{115}$ $\frac{2}{125}$ lbs/gal (Same unit and density must be used for all quantities on this page) ntity generated in : 8 Previous reporting year $\frac{88010}{120}$. C. Current reporting year $\frac{76740}{120}$ |
| Quai | ntity generated in : 8 Previous reporting year 88010. C. Current reporting year 76740 |
| D. | Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, |
| | recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) |
| | |
| (| On-Site System 1: System Type M Quantity managed on-site this year |
| | 155 |
| Sec. | . III OFF-SITE SHIPMENT |
| A. 1 | Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| Site | 1: Name and address of facility: Safety Kleen Envirosystems |
| | State Highway 146, New Castle, KY 40050 |
| 8 | 3. U.S. EPA ID No. of facility waste was shipped to: K Y D 0 5 3 3 4 8 1 0 8 |
| (| C. System type shipped to $M = 0.61$ D. Off-site availability code $\frac{1}{100}$ |
| | E. Total quantity shipped in this reporting year: |
| | 2: Name and address of facility: |
| | Safety Kleen Corp. 633 East 138th St., Dolton, IL 60419 |
| E | 3. U.S. EPA ID No. of facility waste was shipped to: I L D 9 8 0 6 1 3 9 1 3 |
| (| C. System type shipped to M D. Off-site availability code 1 |
| E | E. Total quantity shipped in this reporting year: 2 7 3 0 0 |
| | £14 |
| | IV NEW WASTE MINIMIZATION ACTIVITIES |
| Α. [| Did new activities in this year result in minimization of this waste? $\frac{N}{2724}$ Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) |
| B. A | Activity W W W C. Other effects (Y=Yes, N=No) |
| D. C | auantity recycled in reporting year due to new activities |
| E. A | Activity/production index F. Reporting year Source reduction quantity 251 |
| Sec. | V REGULATED STORAGE |
| Α. [| Old this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N |
| 8 [| ZIO UNIS SILIE SIDIR MUMA WASIAS ON-SIIA IOI MOIR INAN 90 MAVS DUI WASIA IS IN SINIAMA AI VAAI AND IIYE YAS INE INDI |
| 2 | Quantity stored at year end and for 90 days or more that was generated this reporting year: |
| ز | Quantity stored at year end that was generated prior to this reporting year: |
| ת ה | 273 |
| 3 | $\boldsymbol{\gamma}$ |
| 20M | IMENTS: Enter Y (Yes) if you have comments regarding this page and attach extra sheet. Page 40 |

- Total

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM — Waste Generation and Management

| _ | Sec. I WASTE DESCRIPTION |
|------------|--|
| ĺ | A. Waste Description: Mercury Contaminated Solid Waste |
| | B. EPA Hazardous Waste Code D 0 0 9 42 42 46 42 46 42 46 46 47 48 46 47 48 48 48 48 48 48 48 48 48 48 48 48 48 |
| | C CIC and C C C |
| | D. Origin Code $\frac{50}{54}$ System type $\frac{M}{54}$ E. Source code $\frac{A}{5}$ $\frac{5}{3}$ $\frac{A}{65}$ $\frac{A}{65}$ F. Point of measurement $\frac{3}{5}$ G. Waste form code $\frac{1}{5}$ $\frac{3}{5}$ $\frac{1}{5}$ $\frac{1}{5}$ |
| | F. Point of measurement 3 G. Waste form code B3 1 9 |
| | H. Radioactive mixed $\frac{2}{2}$ I. TRI constituent $\frac{2}{2}$ |
| | J. CAS numbers: 1. 75 2 3 |
| | 4 |
| | Sec. II QUANTITY GENERATED AND MANAGED ON-SITE |
| | |
| S. | A. UOM 1 Density 2.3 5 lbs/gal (Same unit and density must be used for all quantities on this page) Ouantity generated in: B Previous reporting year 0.0. C. Current reporting year 170.0 |
| | D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, |
| ند. | recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) |
| 2 | On-Site System 1: System Type M Quantity managed on-site this year |
| | On-Site System 2: System Type M — Quantity managed on-site this year |
| 0 | On-Site System 2: System Type M Quantity managed on-site this year |
| | Sec. III OFF-SITE SHIPMENT |
| | A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| .3 | Site 1: Name and address of facility: Chemical Waste Management, Inc. |
| - | Emelle Facility, Alabama Highway 17 at Mile Marker 163 Emelle, AL 35459 |
| • | BUS EPAID NO OF FACILITY WASTE WAS SUIPORED TO BULL UNDURING A COUNTY OF COUNTY |
| | C. System type shipped to $\frac{M}{182}$ $\frac{1}{3}$ $\frac{3}{2}$ $\frac{2}{D}$. Off-site availability code $\frac{1}{186}$ |
| ٠ | E. Total quantity shipped in this reporting year: 1 7 0 0 |
| | ite 2: Name and address of facility: |
| , - | |
| | |
| | B. U.S. EPA ID No. of facility waste was snipped to: |
| | C. System type shipped to M D. Off-site availability code |
| | E. Total quantity shipped in this reporting year: |
| | 214 |
| | Sec. IV NEW WASTE MINIMIZATION ACTIVITIES |
| | A. Did new activities in this year result in minimization of this waste? N + Y= Y= Y= (Cont. to Box B) N= No (Cont. to Sec. V) |
| | B. Activity W W W C. Other effects (Y=Yes, N=No) |
| | D. Quantity recycled in reporting year due to new activities |
| | E. Activity/production index F. Reporting year Source reduction quantity 238 738 738 748 |
| | Sec. V REGULATED STORAGE |
| | A Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N |
| | Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) |
| | Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) Quantity stored at year end and for 90 days or more that was generated this reporting year: Quantity stored at year end that was generated prior to this reporting year: 203 |
| | Quantity stored at year end that was generated prior to this reporting year: |
| | 273 |
| | ~ ~ |
| | COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet. |

FORM GM - WASTE GENERATION AND MANAGEMENT

COMMENTS

SEC. I, LINE G. - WASTE FORM CODE B319 = TRASH CONTAMINATED WITH MERCURY

SEC. I, LINE J. - MERCURY COMPOUNDS (NO C.A.S. NUMBER)

PAGE OF 19

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CERRO COPPER PRODUCTS CO
3000 MISSISSEPRESE HWY 3
SAUGET IL
62206

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM — Waste Generation and Management

Instructions for this form found on pages 13 - 30.

| instructions for this form found on pages 13 - 30. | |
|--|------------------------|
| Sec. I WASTE DESCRIPTION | |
| A. Waste Description: Waste Trichloroethylene | |
| B. EPA Hazardous Waste Code F 0 0 1 | |
| C. SIC code $\frac{3}{46}$ $\frac{3}{16}$ $\frac{5}{1}$ $\frac{1}{10}$ | |
| C. SIC code 3 3 5 1 D. Origin Code 5 3 5 1 F. Point of measurement 1 H. Radioactive mixed 2 8 | |
| F. Point of measurement 1 G. Waste form code B 2 0 2 | |
| H. Radioactive mixed 2 ss I. TRi constituent 2 ss | |
| J. CAS numbers: 1. 73 7 9 - 0 1 - 6 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. | |
| | |
| 4 5 | |
| Sec. II QUANTITY GENERATED AND MANAGED ON-SITE | |
| UOM 1 Density 1 1 . 5 5 lbs/gal (Same unit and density must be used for all quantities on this page) | |
| Quantity generated in : B Previous reporting year 0.0. C. Current reporting year | 6394.0 |
| D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatme | nt, |
| recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) | • |
| On-Site System 1: System Type M Oughtity managed on-site this year | |
| On-Site System 1: System Type M Quantity managed on-site this year Quantity managed on-site this year Quantity managed on-site this year | ·· - |
| 155 Coalitary managed on-site this year | - * |
| Sec. III OFF-SITE SHIPMENT | |
| A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to S | ec. IV) |
| Site 1: Name and address of facility: | · |
| Clayton Chemical Co. | |
| No. 1 Mobile Ave., Sauget, IL 62201 | |
| B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 | |
| C. System type shipped to M 0 2 2 D. Off-site availability code | |
| E. Total quantity shipped in this reporting year: 6 3 9 1864 0 | |
| Je 2: Name and address of facility: | |
| | |
| | |
| B. U.S. EPA ID No. of facility waste was shipped to: | |
| C. System type shipped to M D. Off-site availability code | |
| a 209 | |
| E. Total quantity shipped in this reporting year: | |
| Sec. IV NEW WASTE MINIMIZATION ACTIVITIES | |
| | Cont. to Sec. VI |
| A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (| 56.14 10 000. 1 |
| B. Activity W W W W W C. Other effects (Y=Yes, N=No) | |
| D. Quantity recycled in reporting year due to new activities | |
| E. Activity/production index F. Reporting year Source reduction quantity | |
| Sec. V REGULATED STORAGE | |
| A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Ye | e NaMor N |
| B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: //- Yes. No. | 3, 140110/ 17 |
| the state of the s | NO) (1 |
| Quantity stored at year end and for 90 days or more that was generated this reporting year: | |
| Quantity stored at year end that was generated prior to this reporting year: | |
| | R |

Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

and the second s

Instructions for this form found on pages 13 - 30.

| | Sec. I WASTE DESCRIPTION | |
|---------------|--|----------|
| • | A. Waste Description: Waste Cleaning Solution, Phosphoric Acid | |
| | 9. EPA Hazardous Waste Code D 0 0 2 | |
| | C. SIC code $\frac{3}{3} \frac{3}{4} \frac{4}{1}$ | |
| • | D. Origin Code 50 1 System type M E. Source code A 2 7 A A | |
| | F. Point of measurement 1 G. Waste form code B1 0 3 | |
| | H. Radioactive mixed 2 66 1 TRI constituent 2 | |
| | $\frac{73}{7} \cdot 6 \cdot 6 \cdot 4 \cdot 3 \cdot 8 \cdot 2 \cdot 2$ | |
| | D. Origin Code $\frac{50}{1}$ System type $\frac{M}{50}$ E. Source code $\frac{A}{5}$ $\frac{27}{5}$ $\frac{A}{65}$ F. Point of measurement $\frac{1}{5}$ G. Waste form code $\frac{B}{5}$ $\frac{1}{5}$ $\frac{A}{5}$ H. Radioactive mixed $\frac{2}{73}$ J. CAS numbers: 1. $\frac{73}{75}$ $\frac{7}{6}$ $\frac{6}{6}$ $\frac{4}{3}$ $\frac{3}{8}$ $\frac{2}{2}$ $\frac{2}{15}$ | |
| | 4 · · · · · · · · · | |
| | Sec. II QUANTITY GENERATED AND MANAGED ON-SITE | |
| | | |
| \approx | A. UOM $\frac{1}{15}$ Density $\frac{1}{16}$ $\frac{0}{15}$ _ ibs/gal (Same unit and density must be used for all quantities on this page) Quantity generated in : B Previous reporting year $\frac{1}{120}$ $\frac{0}{120}$. C. Current reporting year $\frac{495}{120}$. | Ω |
| | Country generated in . B. Previous reporting year 120 120 130 130 130 130 130 130 130 130 130 13 | <u> </u> |
| <u>.</u> | D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, | |
| _ | recycling, or disposal process? N= Y= Yes (Continue to System 1) N= No (Skip to Sec. III) | |
| S) | On-Site System 1: System Type M Quantity managed on-site this year | |
| | On-Site System 1: System Type M Quantity managed on-site this year Quantity managed on-site this year Quantity managed on-site this year 145 Quantity managed on-site this year 155 Quantity managed on-site this yea | |
| | 155 | |
| = | Sec. III OFF-SITE SHIPMENT | |
| _ | A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) | |
| - | Site 1: Name and address of facility: | |
| \ | Heritage Environmental Services | |
| _ | 7901 W. Morris St., Indianapolis IN 46231 | |
| 7 | B. U.S. EPA ID No. of facility waste was shipped to: I N D O 9 3 2 1 9 0 1 2 | |
| = | C. System type shipped to M 0 7 7 E. Total quantity shipped in this reporting year: D. Off-site availability code 1 4 9 186 5 0 | |
| | E. Total quantity shipped in this reporting year: 4 9 186 5 0 | |
| | Site 2: Name and address of facility: | |
| | | |
| | | |
| | B. U.S. EPA ID No. of facility waste was shipped to: | |
| | 107 | |
| | C. System type shipped to M D. Off-site availability code | |
| | E. Total quantity shipped in this reporting year: | |
| | Sec. IV NEW WASTE MINIMIZATION ACTIVITIES | |
| | A. Did new activities in this year result in minimization of this waste? N - Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) | |
| | | |
| | 23 - 23 - 24 - 24 - 27 | |
| | D. Quantity recycled in reporting year due to new activities | |
| | E. Activity/production index F. Reporting year Source reduction quantity 231 | - |
| | Sec. V REGULATED STORAGE | |
| _ | A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) | |
| $\frac{1}{2}$ | B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) | |
| 000 | Quantity stored at year end and for 90 days or more that was generated this reporting year: | |
| 9 | Quantity stored at year end that was generated prior to this reporting year: | - |
| C) | , and any and the same series to the same series in the same and s | ı |
| \bigcirc | 12) | |

Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form GM -- Waste Generation and Management

| • | WASTE DESCRIPTION | nated Coil and Curvel |
|-------------------------|--|---|
| | | nated Soil and Gravel |
| | A Hazardous Waste Code $\frac{D}{30}$ $\frac{0}{30}$ $\frac{8}{34}$ | |
| C. SIC | C code $\frac{3}{50} \frac{3}{1} \frac{4}{2} \frac{1}{1}$ | 5 Commonate & F. O. A. A. |
| D. Ong | gin Code 50 1 System type M | E. Source code A 5 9 A A A A |
| | int of measurement 1 | G. Waste form code B 3 0 2 |
| H. Rad | dioactive mixed 2 | I. TRI constituent $\frac{3}{24}$ |
| J. CAS | S numbers: 1 2. | 3 |
| | 4 5. | 41 Ü |
| | 99 | 107 |
| Sec. II | QUANTITY GENERATED AND MANAGE | ED ON-SITE |
| A. UOM | M $\frac{3}{2}$ Density $\frac{1}{2}$ $\frac{3}{2}$ $\frac{0}{2}$ lbs/gal (Same un | it and density must be used for all quantities on this page) |
| Quantity | generated in : B Previous reporting year | it and density must be used for all quantities on this page) O. Current reporting year 2 5 8 4 8 0 . 0 |
| D. Did 1 | this location do any of the following to this was | ste (at this location): manage in exempt or regulated treatment, |
| - | | continue to System 1) N= No (Skip to Sec. III) |
| on-S | Site System 1: System Type M Qu | antity managed on-site this year |
| On 6 | Site System 2: System Type M | innthy managed on eith this year |
| .D | Site System 2: System Type M Qu | 159 |
| - Sec. III | OFF-SITE SHIPMENT | |
| | | g year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| Site 1: N | Name and address of facility: | 189 |
| P | Peoria Disposal Co. #1 | |
| | | 61615 |
| B. U چہ | J.S. EPA ID No. of facility waste was shipped t | o: <u>I L D 0 0 0 8 0 5 8 1 2</u> |
| C. S | System type shipped to M 1 1 1 | D. Off-site availability code 1 |
| | fotal quantity shipped in this reporting year: | 2 5 8 4 8 100 . 0 |
| | Name and address of facility: | |
| | | |
| , T | | |
| R II | J.S. EPA ID No. of facility waste was shipped to | ^ |
| <i>5.</i> 5 | inc. Er n io no. or recitly waste was simpled to | 187 — — — — — — — — — — — — — — — — — — — |
| | System type shipped to M | D. Off-site availability code |
| E. 10 | otal quantity shipped in this reporting year: | |
| Sec IV N | NEW WASTE MINIBARTATION ACTIVITIE | • |
| | NEW WASTE MINIMIZATION ACTIVITIE | |
| A. Oid n | new activities ir, this year result in minimization | of this waste? N. Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) |
| B. Activi | rity W W W W W | C. Other effects (Y=Yes, N=No) |
| D. Quan | ntity recycled in reporting year due to new activ | rities |
| E. Activi | rity/production index | F. Reporting year Source reduction quantity |
| Coo V F | | ΔI |
| | REGULATED STORAGE | · · · · · · · · · · · · · · · · · · · |
| A. Did th | | nd then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) |
| G Digit | | an 90 days but waste is in storage at year end: (Y= Yes, N= No) |
| | Quantity stored at year end and for 90 days or | |
| တ် | Quantity stored at year end that was generated | prior to this reporting year: |
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| | ATE. | <i>I</i> } |
| COMME | Enter Y (Yes) if you have con | nments regarding this page and attach extra sheet. |
| Programme Communication | MATERIAL CONTRACTOR OF THE STATE OF THE STAT | Contract of the second contract of the contract of the second contract of the |

1993 HAZARDOUS WASTE REPORT FORM GH - WASTE GENERATION AND MANAGEMENT COMMENTS

SEC. I, LINE J. LEAD COMPOUNDS (NO. C.A.S. NUMBER)

PAGE H OF 19

| | Sec. I WASTE DESCRIPTION A. Waste Description: Waste Oil Halogen Contaminated |
|-------------|---|
| | B. EPA Hazardous Waste Code F 0 0 1 D.0 0 5 D 0 0 8 D 0 0 1 |
| | |
| • | D. Origin Code 1 System type M E. Source code A 5 4 A 5 1 A 1 9 |
| | F. Point of measurement 1 G. Waste form code B 2 0 6 6 |
| | D. Origin Code $\frac{50}{1}$ System type M E. Source code A $\frac{5}{4}$ A $\frac{5}{4}$ A $\frac{5}{4}$ A $\frac{5}{4}$ B $\frac{5}{4}$ B. Source code B $\frac{5}{4}$ B $\frac{5}{$ |
| | J. CAS numbers: 1. 7 1 - 5 5 - 6 2. 7 9 - 0 1 - 76 3 |
| | 4. 20 5. 107 |
| | |
| | Sec. II QUANTITY GENERATED AND MANAGED ON-SITE A LIOM 1 Density 7 5 0 the trad (Same unit and density must be used for all quantities on this page). |
| ~ | A. UOM 1 Density 7.5 0 lbs/gal (Same unit a.xl density must be used for all quantities on this page) Quantity generated in: B Previous reporting year 4 2 4 3 8.0 . C. Current reporting year 4 8 0 1 8.0 |
| | D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, |
| | |
| .0 | recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III) On-Site System 1: System Type M Oughtity managed on-site this year |
| | On-Site System 1: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year On-Site System 2: System Type M Quantity managed on-site this year |
| \supset | 155 Code division 2. System Type M Code littly Hallaged Off-Site tills year |
| = | Sec. III OFF-SITE SHIPMENT |
| - | A. Was any of this waste shipped off site this reporting year? Y= Yes (Continue to Box B) N= No (Skip to Sec. IV) |
| = | Site 1: Name and address of facility: |
| \ | Holnam Inc./Safety-Kleen P.O. Box 456, Clarksville, MO 63336 |
| | NO.D.O.2.0.7.2.0.6.0.0 |
| , Ç | B. U.S. EPA ID No. of facility waste was shipped to: M 0 D 0 2 9 7 2 9 6 8 8 C. System type shipped to M 0 5 1 E. Total quantity shipped in this reporting year: 4 3 8 8 106 . 0 Site 2: Name and address of facility: |
| \supset | C. System type shipped to $M = 0.5 \pm 1$ D. Off-site availability code $\frac{1}{166}$ |
| C \ | E. Total quantity shipped in this reporting year: 4 3 8 8 6 0 |
| ", | Site 2: Name and address of facility: Clayton Chemical Company |
| > | No. 1 Mobile Ave., Sauget, IL 62201 |
| | |
| | B. U.S. EPA ID No. of facility waste was shipped to: I L D O 6 6 9 1 8 3 2 7 |
| | C. System type shipped to $M \cup 6 \perp$ D. Off-site availability code \perp |
| | E. Total quantity shipped in this reporting year: 4 1 3 2 0 213 |
| | |
| | Sec. IV NEW WASTE MINIMIZATION ACTIVITIES |
| | A. Did new activities in this year result in minimization of this waste? Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V) |
| | B. Activity W W W C. Other effects (Y=Yes, N=No) |
| | D. Quantity recycled in reporting year due to new activities |
| | B. Activity W W W C. Other effects (Y=Yes, N=No) D. Quantity recycled in reporting year due to new activities E. Activity/production index F. Reporting year Source reduction quantity F. Reporting year Source reduction quantity |
| | Sec. V REGULATED STORAGE |
| _ | A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) B. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) |
| 2 | B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) |
| ر 5 | Quantity stored at year end and for 90 days or more that was generated this reporting year: |
|) | Quantity stored at year end that was generated prior to this reporting year: |
| | |
|) | COMMENTS: Y Face V Comments |
| | COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet. |

1993 HAZARDOUS WASTE REPORT FORM GM - WASTE GENERATION AND MANAGEMENT COMMENTS

SEC. I, LINE J. - LEAD COMPOUNDS (NO C.A.S. NUMBER)

PAGE OF 19

C

CERRO COPPER PRODUCTS CO 3000 MISSISSIPPI & HWY 3 SAUGET IL 62206

ILLINOIS Environmental Protection Agency 1993 Hazardous Waste Report Form TI – Transporter Identification

Instructions for this form found on page 31.

1. U.S. EPA ID No. I L D 0 9 9 2 0 2 6 8 1 . Illinois Special Waste Hauling Permit No. 0 0 7 5

Transporter Name and Address:

Chemical Waste Management Inc. #7 Mobile Ave. Sauget, IL 62201

2. U.S. EPA ID No. I L D 0 0 6 4 9 1 2 8 6, Illinois Special Waste Hauling Permit No. 0 0 2 5

Transporter Name and Address:

Schiber Truck Co. P.O. Box 51 Hartford, IL 62048

3. U.S. EPA ID No. I L D 0 6 6 9 1 8 3 2 7. Illinois Special Waste Hauling Permit No. 0 2 6 1

Transporter Name and Address:

Clayton Chemical Co. #1 Mobile Ave. Sauget, IL 62201

4. U.S. EPA ID No. M 0 D 0 3 1 1 0 2 0 2 3 . Illinois Special Waste Hauling Permit No. 0 8 6 5

Transporter Name and Address:

Superior Equipment Co. 3283 Ivanhoe St. Louis, MO 63139

5. U.S. EPA ID No. I N D 0 5 8 4 8 4 1 1 4, Illinois Special Waste Hauling Permit No. 1 5 5 4

Transporter Name and Address:

1.6

7

Heritage Transport, Inc. 7901 W. Morris St. Indianapolis, IN 46231

6. U.S. EPA ID No. II Y D 9 8 0 7 6 9 9 4 7, Illinois Special Waste Hauling Permit No. 1 7 9 7

Transporter Name and Address:

Hazmat Environmental Group, Inc. P.O. Box 676
Buffalo, NY 14207

7. U.S. EPA ID No. I L D 0 0 9 8 4 8 1 9 3 . Illinois Special Waste Hauling Permit No. 0 0 8 2

Transporter Name and Address:

PDC Transportation 1113 North Swords Ave. Peoria, IL 61604

8. U.S. EPA ID No. I N D 9 8 4 8 7 4 6 0 2, Illinois Special Waste Hauling Permit No. 2 7 2 0

the second se

Transporter Name and Address:

Clean Strcams, Inc. 2345 Summer St. Hammond, IN 46320

COMMENTS: ____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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P.D. Box 66800 St. Louis, MO 63166-6800 618/337-6000

February 28, 1994

Illinois Environmental Protection Agency Division of Land Pollution Control #24 P.O. Box 19276 Springfield, Illinois 62794-9276

> 1993 GENERATOR ANNUAL HAZARDOUS WASTE REPORT, U.S.E.P.A. I.D. NO. ILD080018914, I.E.P.A. I.D. NO. 1631210008

Gentlemen:

Enclosed is the completed 1993 GENERATOR ANNUAL HAZARDOUS WASTE REPORT for Cerro Copper Products Company. Should additional information or clarification be required, please contact my office or that of Joseph M. Grana, Manager of Environmental and Energy Affairs, at 618/337-6000.

Very truly yours,

CERRO COPPER PRODUCTS CO.

Joe D. Burroughs

Environmental Engineer

Enclosure

cc. Joseph M. Grana

RECEIVED MAR U1 1994 **IEPA/DLPC**